UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

116	3	4	1	/

OMB APPROVAL					
OMB Number:	3235-0076				

Expires: May 31, 2005

Estimated average burden

hours per response......1

SEC USE	ONLY
Prefix	Serial
DATE REC	EIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series I Preferred Stock, and the underlying common stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Hire.com, Inc.	04033131
Address of Executive Offices (Number and Street, City, State, Zip Code) 200 Academy Drive, Austin, TX 78704	Telephone Number (Including Area Code) 512.583.4400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Internet recruiting software	HECEIVES (I)
Type of Business Organization Corporation Imited partnership, already formed business trust Ilimited partnership, to be formed other	(please specify): 23 181
Actual or Estimated Date of Incorporation or Organization: Month Year 0 5 9 4	Actual Estimated tate:
GENERAL INSTRUCTIONS	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a c Each executive officer and director of corporate issuers and of corporate general and managing partners of partner Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	or General and/or Managing Partner
Full Name (Last name first, if individual)	
Orecklin, Larry	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Hire.com, Inc., 200 Academy Drive, Austin, TX 78704	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director	or General and/or Managing Partner
Full Name (Last name first, if individual)	
Stringer II, Henry K.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Hire.com, Inc., 200 Academy Drive, Austin, TX 78704	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Dansby, Michael	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Hire.com, Inc., 200 Academy Drive, Austin, TX 78704	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	or General and/or Managing Partner
Full Name (Last name first, if individual) Austin Ventures VII, L.P.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
300 W. 6th Street, Ste. 2300, Austin, TX 78701	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	or General and/or Managing Partner
Full Name (Last name first, if individual)	
TL Ventures Funds and related entitites	
Business or Residence Address (Number and Street, City, State, Zip Code)	
400 West 15th Street, Suite 820, Austin, TX 78701	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	or General and/or Managing Partner
Full Name (Last name first, if individual)	
Crosspoint Venture Partners 1997	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Andrew Alcon, 2925 Woodside Rd, Woodside, CA 94062	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	or General and/or Managing Partner
Full Name (Last name first, if individual)	
Kleiner Perkins Caufield & Byers Funds and related entities	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o John Doerr, 2750 Sand Hill Road, Menio Park, CA 94025	

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Adams Street V, L.P.	*				
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)			
Attn: Keith Spellman, 4 New	w York Plaza, New Y	ork, NY 10004			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or
					Managing Partner
Full Name (Last name first, if	findividual)			-	
DeAngelis, Kenneth					
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)			
c/o Austin Ventures, 300 W	est 6 th Street, Suite 23	00, Austin, TX 78701			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or
					Managing Partner
Full Name (Last name first, if	findividual)				
Lindelow, Jan					
Business or Residence Addre	ss (Number and Street,	, City, State, Zip Code)			
8105 Ravello Ridge Cove, A	ustin, TX 78735				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or
					Managing Partner
Full Name (Last name first, if	f individual)				
Pacitti, Christopher					
Business or Residence Addre	ss (Number and Street	City, State, Zip Code)			
c/o Austin Ventures, 300 W.	6 th Street, Suite 2300), Austin, TX 78701			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if	findividual)				
Hammock, James T.	·				
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)			
c/o Hire.com, Inc., 200 Acad					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or
					Managing Partner
Full Name (Last name first, if	f individual)				
Spencer, George					
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)			
, , ,			.		
c/o Adams Street, One North			<u></u>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)			
	(,,,			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
					Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)			

			Section 1	В.	INFOR	MATION A	ABOUT OF	FERING	S121			•
1 Has	h	d db :		11			1:			···	Yes	No
1. Has	the issuer sold,	or does the i	ssuer intend				-	ınder ULOE.				\boxtimes
2. Wha	t is the minimu	m investmen	t that will be				-				\$	n/a
1 D	41 - 60 1		12	-1110							Yes	No
	the offering portion the information	-	-	=							⊠	Ц
remu perso than	neration for so on or agent of a five (5) person or only.	licitation of p broker or dea	urchasers in o aler registered	connection w I with the SE	vith sales of se C and/or with	ecurities in th h a state or st	ne offering. I ates, list the	f a person to be name of the b	oe listed is ar roker or deal	associated er. If more		
Full Name	(Last name fir	st, if individu	ıal)					-				
Business o	r Residence A	ddress (Numl	ber and Stree	t, City, State	, Zip Code)							
Name of A	ssociated Brok	cer or Dealer										. , , , , , , , , , , , , , , , , , , ,
States in V	hich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers							
(Check	"All States" or	check indivi	duals States)	••••••				***************************************	••••••		□ A	II States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name fir	nt if individ	t)				-					
run Name	(Lust hanne in	st, ii maividt	iai)									
	r Residence Ad			t, City, State	, Zip Code)						· · · · · · · · · · · · · · · · · · ·	
Business o		ddress (Numl		t, City, State	, Zip Code)							
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Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business of A States in V	r Residence Adssociated Brokenssociated Broken	ddress (Number or Dealer isted Has Solicheck indivinity) [IA] [IV] [SD] st, if individual individual isted Has Solicheck individual	licited or Inte duals States) [AR] [KS] [NH] [TN] ber and Stree	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business of A States in V (Check	r Residence Adssociated Brokenssociated Brokenssociated Brokense Adstruction (AK) [IN] [NE] [SC] (Last name first r Residence Adssociated Brokense Adstruction (AK) Associated Brokense Adstruction (AK) (ASSOCIATE AM) (A	ddress (Number or Dealer isted Has Solocheck indiving [AZ] [IA] [NV] [SD] st, if individual individual isted Has Solocheck individual isted Has Solocheck individual isted Has Solocheck individual individual isted Has Solocheck individual indi	licited or Inte duals States) [AR] [KS] [NH] [TN] aal) ber and Stree duals States)	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business of A States in V (Check [AL]	r Residence Adssociated Brokenssociated Brokense Adstraction [AK] [IN] [NE] [SC] (Last name finer Residence Adssociated Brokense Adstraction [AK]	ddress (Number or Dealer isted Has Solicheck individual) [IA] [IV] [SD] st, if individual individual isted Has Solicheck individual isted Has Solicheck individual)	licited or Inte duals States) [AR] [KS] [NH] [TN] ber and Stree	[CA] [KY] [NJ] [TX] t, City, State	it Purchasers [CO] [LA] [NM] [UT] c, Zip Code) it Purchasers	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	_	\$
	Equity	\$ 8,509,691.12	\$ 8,509,691.12
	☐ Common ☒ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)		\$
	Total		\$ 8,509,691.12
	Answer also in Appendix, Column 3, if filing under ULOE.	- <u> </u>	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	16	\$ <u>8,509,691.12</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$185,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$ 185,000.00

			USE OF PROCEEDS	
e	total expenses furnished in response to	ggregate offering price given in response to Part C - Question 1 and Part C - Question 4.a. This difference is the "adjusted gross	i	\$ <u>8,324,691.12</u>
	the purposes shown. If the amount for	ted gross proceeds to the issuer used or proposed to be used for each any purpose is not known, furnish an estimate and check the box to syments listed must equal the adjusted gross proceeds to the issuer 4.b above.	the	
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		\$	S
	Purchase of real estate		\$	\$
	Purchase, rental or leasing and installa	ation of machinery and equipment	\$	\$
	Construction or leasing of plant buildi	ngs and facilities	\$	\$
		ding the value of securities involved in this offering that may be arities of another issuer pursuant to a merger)	□ \$	□ s
	Repayment of indebtedness		\$	 \$
	Working capital		\$	∑ \$ 8,324,691.12
	Other (specify):		\$	□ \$
	Column Totals		□ \$	\$\\\ \\$\\\ \\$\\\ \\$\\\ \\$\\\ \\$\\\ \\$\\\ \\$\\\ \\$\\\\ \\$\\\\ \\$\\\\ \\$\\\\\ \\$\\\\\\
	Total Payments Listed (column t	otals added)		4,691.12
* .		D. FEDERAL SIGNATURE		
under		med by the undersigned duly authorized person. If this notice is filed understries and Exchange Commission, upon written request of its staff (2) of Rule 502.		
	r (Print or Type) com, Inc.		ate ine /\(\sum_2004\)	
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type) Chief Financial Officer	me <u>70</u> 2004	
Mich	ael Dansby	Chief Financial Officer		

1.	Is any party described in 17 CFR 230.262 pr	esently subject to any of the disqualification pr		Yes	No 🖂
		See Appendix, Column 5, for state resp	oonse.		
2.	The undersigned issuer hereby undertakes to 239,500) at such times as required by state la	furnish to any state administrator of any state aw.	in which this notice is filed, a not	ice on Form D (17 CFR
3.	The undersigned issuer hereby undertakes to	furnish to the state administrators, upon writte	en request, information furnished	by the issuer to	offerees.
4.	č i	suer is familiar with the conditions that must be s notice is filed and understands that the issuer satisfied.			_
	e issuer has read this notification and knows the norized person.	e contents to be true and has duly caused this n	otice to be signed on its behalf by	the undersigned	d duly
Issu	ıer (Print or Type)	Signature	Date		
Hir	e.com, Inc.	MINGUES	June 5, 2004		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			

Chief Financial Officer

Michael Dansby

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3						
	Intend to sell to non-accredited investors in aggregate offering State price offered in state (Part B-Item 1) Intend to sell to Type of security and Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)				
_				Number of Accredited		Number of Non-Accredited			
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AK									
AZ							····		
AR									
CA		X	Series I Preferred Stock \$8,509,691.12	1	\$149,998.93	0	\$0.00		X
СО									
CT									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
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APPENDIX

1	2	3		5			
	Intend to sell to non-accredited investors in State (Part B-Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)			
NH							
NJ							
NM							
NY		Series I Preferred Stock \$8,509,691.12	1	\$4,249,999.04	0	\$0.00	X
NC							
ОН							
ОК			_				
OR							
PA							
RI							
SC							
SD							
TN							
TX	Х	Series I Preferred Stock \$8,509,691.12	14	\$4,109,693.15	0	\$ 0.00	X
UT							
VT							
VA							
WA							
WI							
WY							
PR							